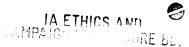
File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073





FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2008 MAY 19 AM 8: 36

PIOOLOGOKE	SUMMART PAGE	COOD ITA	119 AM 8:36		
COMMITTEE NAME (Must be same as on Statement of Org		\neg			
The Committee to Elect Kas Kelly		FORM			
IMPORTANT: Indicate by # type of committee you are reporting for (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Cendidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	(R	DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only			
CANDIDATE COMMITTEES ONLY:		- - °	omm. #		
Candidate Name Kas Kelly	Political Party (if applicable) Democrat	Sc	anned		
Office Sought County Supervisor	District (if Senate or House)		omputer		
ate reports are subject to possible civil and criminal penalties. P	ursuant to lowa Code sections 688.32 319-321-0102 TELEPHONE		A.401(3), the candidate, for a May 1(2, 20)8		
	TEELTIONE	-	WATE SIGNED		
AM FILING A May 19, 2008	REPORT FOR (1) ELECTION	/(<u>2)N</u> ON-E	ELECTION YEAR.		
(report date)	Indicate by	# 1			
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Date of Election		
N.			ov. 4, 2008		
J Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.		which Elect	County & Local Committees, enter County in which Election is held Muscatino		
STATEMENT OF CASH ON HAN	D				
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	cash on hand at the end	\$	1,160.57		
ADD TOTAL MONEY TAKEN IN THIS PERIOD	,				
Schedule A: Cash Contributions total (Attach Sched	dule A) (*also see in-kind below)	44-44-44	63.00		
Schedule F: Loans Received total (Attach Schedule	•				
Schedule H: Total Sales of Campaign Property (Att	•				
(Schedule H applies to Candidates' Com			1,223.57		
SUBTRACT TOTAL MONEY SPENT THIS PERIOR			M. M		
Schedule B: Expenditures total (Attach Schedule B Schedule F: Loan Repayments total (Attach Sched	-) (**also see debts and loans below)				
CASH ON HAND at the end of this reporting period (if final re	•		1,223.57		
**UNPAID BILLS (From Schedule D - Attach Schedule D)					
'IN KIND CONTRIBUTIONS (From Schedule E - Attach Sche			30.24		
COUTSTANDING LOANS (From Schedule F - Attach Sched					
CONSULTANT BREAKDOWN (Schedule G Attached?)	wiw - j	•••••••			
	·		YES V NO		
•	·		_YES _V NO		
CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Att		 \$	_YES <u></u> √ NO		

MONETARY

SCHEDULE

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(1.44.07/05)	RECEIPTIS
COMMITTEE NAME (Must be same as on Statement of Organization)		ECK THIS BOX IF
The Committee to Elect Kas Kelly		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
01/03/08	ID# CK#	Betty L. McMahon 311 - 180th Street; Muscatine, IA 52761		\$50.00	
01/03/08	ID# CK#	Unitemized Contributions		13.00	~
ID#	ID#				
	CK#				L
	ID#				
	CK#				L
ID#				 	
	ск#				
	ID#				
	CK#				L
				,	
CK# ID# CK# ID# CK# ID#		į į		L	
				 	
				 	
				† ==	
				L	
				t 	
	CK#				L
			SUB-TOTAL	\$ 63.00	

TOTAL (if last page of this schedule)

of 1 (for Schedule A)

s 63.00

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM COMMITTEE NAME (Must be same as on Statement of Organization) The Committee to Elect Kas Kelly					SCHEDULE E IN-KIND (Rev. 06/97) CONTRIBUTIONS CHECK THIS BOX IF AMENDING FORM	
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISEF: CONTRIBUTION	
01/03/08	Kas Kelly 1548 Washington St; Muscatine, IA 52761	Self	items for raffle	\$ 30.24	✓	
		·				
	·					

TOTAL (If last page of this schedule)

SUB-TOTAL

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)